



**Dan Skopec**  
Acting Secretary  
Environmental Protection

# California Regional Water Quality Control Board

## Colorado River Basin Region

73-720 Fred Waring Drive, Suite 100, Palm Desert, California 92260  
(760) 346-7491 • Fax (760) 341-6820  
<http://www.waterboards.ca.gov/coloradoriver>



**Arnold Schwarzenegger**  
Governor

### SECTION 401 WATER QUALITY CERTIFICATION APPLICATION FORM

Applications for Water Quality Certification shall be filed in accordance with Sections 3830 through 3869 of Title 23 of the California Code of Regulations. An initial deposit of **\$500** must accompany all applications. Please include a check made out to the State Water Resources Control Board. **Failure to submit this fee deposit will make this application incomplete. Submit your completed application form to the address above, Attn: 401 Coordinator.** Attach additional sheets as necessary.

#### 1. APPLICANT/AGENT INFORMATION

a) Applicant:	b) Applicant's Representative:
Address:	Address:
Phone No.	Phone No.
Fax No.	Fax No.

\*Complete only if applicable

#### 2. PROJECT DESCRIPTION

a) Project Title:
b) Purpose/Goal:
c) Project Activities:
d) Proposed Schedule (start-up, duration, and completion dates):



### 3. FEDERAL LICENSES/PERMITS

a) Federal Agency(ies)/File Number(s) (Attach a copy of the application):

U.S. Army Corps of Engineers\_\_\_\_\_ Other\_\_\_\_\_

File No.(s) (if known)\_\_\_\_\_

b) Permit Type(s) (please provide permit number(s) if known):

Nationwide Permit No.(s)\_\_\_\_\_ Regional General Permit No.(s) \_\_\_\_\_

Individual Permit\_\_\_\_\_ Other\_\_\_\_\_

c) Does the project require any Federal Application(s), Notification(s) or Correspondence?

Yes \_\_\_\_\_ (attach copy(ies)) No \_\_\_\_\_ (attach detailed explanation)

### 4. OTHER LICENSES/PERMITS/AGREEMENTS

a) Please list all other required regulatory approvals (submit final or draft copy if available):

Agency	License/Permit/Agreement	Approval Date

b) Does the project require a Federal Energy Regulatory Commission (FERC) license or amendment to a FERC license?

No\_\_\_\_\_ Yes\_\_\_\_\_ (attach application copy)

### 5. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)

Indicate CEQA Document (submit final or draft copy if available\*) and Lead Agency:

Categorical Exemption\_\_\_\_\_ Negative Declaration\_\_\_\_\_ Environmental Impact Report\_\_\_\_\_

Has the document been certified/approved, or has a Notice of Exemption been filed?\_\_\_\_\_

If yes, date of approval/filing\_\_\_\_\_ If no, expected approval/filing date:\_\_\_\_\_

Lead Agency\_\_\_\_\_

\*Note, ample time must be provided to the certifying agency to properly review a final copy of valid CEQA documentation before certification can occur.

## 6. PROJECT SITE DESCRIPTION (INCLUDES AREAS OUTSIDE OF U.S. WATERS)

a) Project Location (Attach a road map of the site with waters clearly indicated and a 7.5 minute topographic map with the site outlined):

City or Area \_\_\_\_\_ County \_\_\_\_\_  
Longitude/Latitude \_\_\_\_\_ Township/Range \_\_\_\_\_

b) Total Size:

\_\_\_\_\_ acres \_\_\_\_\_ linear feet (if appropriate)

c) Area Type/Description (check as appropriate):

Urban \_\_\_\_\_ Residential \_\_\_\_\_ Recreation \_\_\_\_\_  
Agriculture \_\_\_\_\_ Open Space \_\_\_\_\_ Wildlife Corridor \_\_\_\_\_  
Migratory Pathway \_\_\_\_\_ Spawning Habitat \_\_\_\_\_  
Threatened/Endangered Species Habitat \_\_\_\_\_ Other \_\_\_\_\_

## 7. IMPACTED WATER BODIES

a) Name(s) of Receiving Water Body(ies)\*:

b) Indicate in ACRES and LINEAR FEET (where appropriate) the proposed **waters of the United States** to be impacted by any discharge other than dredging, and identify the impacts(s) as permanent and/or temporary for each water body type listed below:

Jurisdictional Wetland:	_____ permanent,	_____ temporary ACRES
	_____ permanent,	_____ temporary LINEAR FEET
Streambed (vegetated):	_____ permanent,	_____ temporary ACRES
	_____ permanent,	_____ temporary LINEAR FEET
Streambed (unvegetated):	_____ permanent,	_____ temporary ACRES
	_____ permanent,	_____ temporary LINEAR FEET
Lake/Reservoir:	_____ permanent,	_____ temporary ACRES
	_____ permanent,	_____ temporary LINEAR FEET
Ocean/Estuary/Bay:	_____ permanent,	_____ temporary ACRES
	_____ permanent,	_____ temporary LINEAR FEET

c) Indicate in CUBIC YARDS the volume of Dredged material to be discharged in waters of the United States:

d) Indicate type(s) of material proposed to be discharged in waters of the United States:

\*All receiving water bodies must be identified in the *Water Quality Control Plan, Colorado River Basin Region* (Basin Plan). Any unnamed/unidentified waters must be extended to an identifiable tributary.

## 8. COMPENSATORY MITIGATION

- a) Indicate in ACRES and LINEAR FEET (where appropriate) the total quantity of **waters of the United States** proposed to be Created, Restored and/or Enhanced for purposes of providing Compensatory Mitigation:

Water Body Type	Created	Restored	Enhanced
Jurisdictional Wetland			
Streambed (vegetated)			
Streambed (unvegetated)			
Lake/Reservoir			
Ocean/Estuary/Bay			

- b) If contributing to a Mitigation or Conservation Bank, indicate the agency, dollar amount, acreage, and water body type (omit if not applicable):

Conservation Agency \_\_\_\_\_

\$ \_\_\_\_\_ for \_\_\_\_\_ acres of \_\_\_\_\_ (water body type)

How many acres of this qualify as waters of the United States?

- c) Other Mitigation (omit if not applicable):

How many acres of this qualify as waters of the United States?

- d) Location of Compensatory Mitigation Site(s) (attach map of suitable quality and detail):

City or Area \_\_\_\_\_

County \_\_\_\_\_

Longitude/Latitude \_\_\_\_\_

Township/Range \_\_\_\_\_

## 9. OTHER ACTIONS/BEST MANAGEMENT PRACTICES (BMPs)

Briefly describe other actions/BMPs to be implemented to Avoid and/or Minimize impacts to waters of the United States, including preservation of habitats, erosion control measures, project scheduling, flow diversions, etc.

## 10. PAST/FUTURE PROPOSALS BY THE APPLICANT

Addressee

- 2 -

Date

Briefly list/describe any projects carried out in the last 5 years or planned for implementation in the next 5 years that are in any way related to the proposed activity or may impact the same receiving body of water. Include estimated adverse impacts.

\_\_\_\_\_  
Applicant's Signature (or Agent)

\_\_\_\_\_  
Date

**Please forward the application package and, if possible, a disk containing an electronic copy of the completed application to:**

**California Regional Water Quality Control Board, Colorado River Basin Region  
73-720 Fred Waring Drive, Suite 100  
Palm Desert, CA 92260**

Addressee

- 3 -

Date

**Should you have any questions regarding the water quality certification process, please contact Kirk Larkin at (760) 776-8964.**